

I would like to take this opportunity to comment on the permanent reassignment of the 1-800-SUICIDE number to the National Suicide Prevention Lifeline. I have been a member of both networks and feel I can speak from experience that this reassignment is both in the best interests of suicide prevention advocates and the national community at large.

As one of the first five centers added to the Kristin Brooks Hope Network, I have witnessed much change in the national networks. What had been initiated by Mr. Butler and eventually a small band of devoted staff, quickly deteriorated into a lack of coordinated administration and leadership. It was clear that, even while enjoying the funding from SAMHSA, KBHC lacked a clear coordination and ultimately sustainability. While serving as a KBHC network center, we worked for many years without any formal agreement between the Crisis Line and KBHC. We were not able to resolve call routing issues quickly. During the height of KBHC staffing, we, in Virginia, were receiving calls from Idaho. Moreover, we were unable to get resources to help these Idaho callers and eventually had to contact the center in Idaho for information as a stop-gap measure. Finally, we received infrequent call statistics. On a more personal level, as a program director I became aware through my relationships with KBHC staff of decisions made by Mr. Butler, and I assume his Board, that were not consistent with the values and operational procedures of most non-profit organizations that I have ever done business with. His personnel and fiscal management practices bordered on non-compliance and certainly would not agree with most people's ideals of just and reasonable representation of a national suicide prevention network. These choices frankly jeopardized public trust and therefore public safety.

At the outset, NSPL provided us a memo of understanding from the earliest days of its administration. NSPL has been a leader among the crisis centers on the network providing technical information, call utilization reports, and network updates. NSPL has taken seriously its leadership of the centers with outreach through social networking and training opportunities. It has provided a regular stipend and paid for training opportunities that hotlines cannot afford. We receive flash updates when the 1-800-273-TALK number is used by media programs, provided PSA and other materials to advertise the network. We are in frequent contact via emails, a crisis center blog and conference calls. I have been very impressed with the performance of NSPL and its leadership through John Draper and so many others at Lifeline in our hotline community. I sincerely hope that we can finally move forward and heal from the divisions and KBHC diversions caused by having two national networks with the final reassignment of 1-800-SUICIDE to the National Suicide Prevention Lifeline.

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